

United States Of America
Department of Transportation - Federal Aviation Administration
Supplemental Type Certificate

Number SA7397SW

This Certificate issued to AAR Aircraft Services, Inc.
DBA: AAR Aircraft Services-Oklahoma
6611 South Meridian
Oklahoma City, OK 73159-1104

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 23 of the Federal Aviation Regulations.

Original Product Type Certificate Number: A16EU

Make: Dornier-Werke

Model: Do228-200

Description of Type Design Change:

Install Dual Collins MCS-65 Magnetic Compass in accordance with AAR Drawing List 20L002, Rev. C, dated March 12, 1988, or later FAA approved revision.

Limitations and Conditions:

Airplane Flight Manual Supplement 20R004, dated March 21, 1988, or 20R025 dated June 7, 1988, is required. Compatibility of this modification with previously installed equipment must be determined by installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: September 14, 1987

Date reissued: 3/5/99; 3/18/99; 4/8/99

Date of issuance: March 21, 1988

Date amended: June 7, 1988 Rev. 1



By direction of the Administrator

S. Frances Cox
(Signature)

S. Frances Cox, Manager
Special Certification Office,
Southwest Region

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number _____

to *(Name of transferee)* _____

(Address of transferee) _____
(Number and street)

(City, State, and ZIP code)

from *(Name of grantor)* *(Print or type)* _____

(Address of grantor) _____
(Number and street)

(City, State, and ZIP code)

Extent of Authority (if licensing agreement): _____

Date of Transfer: _____

Signature of grantor *(In ink)*: _____